P2-19-4-403 AFFIDAVIT OF FORGED WARRANT

The records of the		of Arkansas	of Arkansas	
reflect that	Agency	was issued Warrant number		
	cactly as original warra	nt	tho	
Correct Fiscal Year and Num	Dated ber Da		_, the	
same being in payment	of			
3 1 7	Invoice # Agend	ey # Fund Center Commitment Item Fund	<u></u>	
Social Security #	Gross Pay	Withholding		
Address – Payroll Only				
Daytime Telephone #		Disbursing Officer		
I/We,Payee (s)		, state tha	t:	
person having5. If this warrant is6. The endorseme	received cashed o			
Payee Signature		Payee Signature		
Address		Address		
City, State, Zip Code		City, State, Zip Code		
executed the foregoing i	nstrument and ack	Daytime Telephone #, 20, before me po nown to be the persons described in an nowledged that they signed, sealed, ex ed for the purpose therein mentioned.	ersonally d who cecuted and	
		NOTARY PUBLICCounty My commission expires		

INSTRUCTIONS – FILING OF AFFIDAVIT OF FORGED WARRANT FORM

- 1. Disbursement officer must complete form including agency, warrant number, date of issue, amount, invoice number, agency code, fund center (appropriation), commitment item (character code), fund, and disbursing officer's manual signature.
- 2. The <u>entire</u> form, including the notary portion, must be completed in order to process a lost or stolen warrant for all types of warrants.

Note: If there is more than one payee on an AASIS non-payroll warrant, <u>BOTH</u> must sign.